

**School Board**Lynn L. Gray, ChairStacy A. Hahn, Ph.D., Vice ChairNadia T. CombsKaren PerezMelissa SnivelyJessica VaughnHenry “Shake” Washington

**Superintendent of Schools**Addison G. Davis

By my signature below, I am verifying that all information provided to the school at the time of my child’s enrollment is to the best of my knowledge, complete and truthful. I understand that my child is being enrolled at this school on the condition that I provide truthful information. I further understand that my child may be withdrawn from enrollment if any of the information I have provided proves to be false.

RESIDENCE

I verify that the child and I live at the address given on the enrollment forms, which is an address within the Blake High School Attendance area.

SPECIAL EDUCATION STATUS (Check one)

[ ]  My child was receiving or staffed to receive special education services at his/her/their most recent educational placement.

[ ]  My child was not receiving or staffed to receive special education services at his/her/their most recent educational placement.

BEHAVIOR (Check one)

[ ]  My child has not been expelled from any school district in the past 12 months.

[ ]  My child has been expelled from a school district in the past 12 months.

REGISTRATION PROCESS

1. Complete all registration documentation.
2. Interview with the Assistant Principal.
3. Meet with the school counselor to select courses.

|  |  |
| --- | --- |
| **Please Type Name Here**Student’s First & Last Name (print) | **Click or tap to enter a date.**Date of Birth |
| Please Sign Digitally HereParent/Guardian’s Signature | 2 June, 2021Date |